State of California—Health and Welfare Agency
Form Approved OMB No. 2050—C039 (Expires 9-30-91)
Please print or type. (Form designed for use on aftle (12-pitch typewriter).

See Instructions on Back of Page 6 and Front of Page 7

Department of Health Services Toxic Substances Control Division Sacramento, California

4	UNIFORM HAZARDOUS	1. Generator's t				fanifest ument No.	2.	Page 1	Inform	ation in	the shaded areas	
	3. Generator's Name and Mailing Address						of	,	-	by Federal law.		
i	PARA PLATE							A. State Manifest Document Number 88346554				
	15910 SHOEMAKER AVE, CERRITOS, CA. 90703 4 Generator's Phone (213) 404-3434						B. State Generator's ID					
	5. Transporter 1 Company Name 6. US EPA ID Number						C. State Transporter's ID					
i	OMEGA RECOVERY SERVICES C A D 0 4 2 2 4 5 0 0 1 7. Transporter 2 Company Name 8. US EPA ID Number						D. Transporter's Phone 213/698-0991					
								E. State Transporter's ID F. Transporter's Phone				
	Designated Facility Name and Site Address 10. US EPA ID Number WEGA RECOVERY SERVICES							G. State Facility's ID				
	12504 E. WHITTIER BLVD.						C 40 0 4 2 3 4 5 0 1 H. Facility's Phone					
	WHITTIER, CA. 90602 (C A D 0 4 2 2 4 5 0 0 1						· · · · · · · · · · · · · · · · · · ·					
	11. US DOT Description (Including Proper St	nipping Name, Haz	erd Class, and	J ID Number)	12. Cont No.	Type	13. To Qu	otal antity	14. Unit Wt/Vol	Waste No.	
	WASTE ORM-A N.O.S., N	IA 1693									State 211 - 212	
	(Flexosolvent)					005	DIM	NOW	130	A	FOOL FOO3	
	b.			7 - 1 - VIII		S. F. I.	- 11·x		I and Brod		State	
						1 1	,		1 1		EPA/Other	
	с.										State	
-						1.1		1 1	1 1		EPA/Other	
ľ	d.								***************************************		State	
L						1 1	,	1 1	1 1		EPA/Other	
	3. Additional Descriptions for Materials Listed Above							K. Handling Codes for Wastes Listed Above				
Ì	a. Material for recycle							01				
							C.			d.		
7	15. Special Handling Instructions and Additional Information											
P	Profile#Bl0016											
	*Emergency#213/404-3434											
ī	16.											
	GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations											
	If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment and toxicity of waste generated to the degree I have determined											
	present and future threat to human health and the environment, OR, if I am a small quantity generator, I have made a good feith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.											
Pi	rinteu, ypad Name			mature	Æ						Month Day Year	
<u> </u>	Frank E. Her	nande	2 5	7/200	115			1974 A	and and		108/1491	
ļ	17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Signature An Month Dev. Year.											
	JAVIER HERNA	NDEZ		(Man	4	C3 2 2	لمحب	4		Month Day Year	
	 Transporter 2 Acknowledgement of Receip inted/Typed Name 	t of Materials		\Box			the state of the s	307	1		13-12-17-17-1	
• '	med: Typed Name		Sig	nature				,			Month Day Year	
19	Discrepancy Indication Space	THE REPORT OF THE PARTY OF THE		1. m. 18. m.				-				
	10. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.											
Pri	nted/Typed Name	2,2	Sig	nature	A. T.	21	7		***************************************		Month Day Year	
	to A SE A S	7 6			Brown Sec.	Arrest States	Ed.				I WILLIAM	